W 8078	FORM	REPORT OF CAMPAIGN CO CHECK APPROPRIATE BOXES—	NTRIBUTIONS AND EXPENDITURES PLEASE TYPE OR PRINT IN BLACK INK	RECEISTORY
	FORM	Quarterly Report:	ast and and the	
	D-2	(Check one:) 1 st 2 nd 3 rd 4 th Final Report (Fund balance on Line E must be \$0) Amendment of the Report Indicated Above		JAN 1 2 2021
THOUSAND TO SERVICE AND ADDRESS OF THE PARTY				State Board of Election Springfield Office
Full name and co	mplete mailing a	Idress of Political Committee:	CHECK FOR ADDRESS CHANGE	COMMITTEE ID #
ED/to	OUEN			COMMITTEE ID #
		THAT COMM.		;
WINCH'S	TEN-SLAS	igan RD		
	whete	31/CK . + L	1	614-13
mail address:	<u> </u>	62694	CHECK FOR E-MAIL ADDRESS CHANGE	
REPORTING P		VAILABLE AT BEGINNING ORTING PERIOD:	ALL POLITICAL COMMITTE STATE BOARD OF ELECTIONS	
1	Ś		2329 S MacARTHUR BLVD OR	STATE BOARD OF ELECTIONS JAMES R THOMPSON CENTER
ROM	THRU Repeat t	nis amount in SECTION D, Line (A)	SPRINGFIELD, IL 62704-4503	100 W RANDOLPH, STE 14-100 CHICAGO, IL 60601-3232
	SECTION A -	- RECEIPTS	SECTION B — EX	PENDITURES
1. Individual Contributions			6. Transfers Out	
a. Itemized (from Schedule A): \$(1a)			a. Itemized (from Schedule B):	\$(6a)
b. Not-Itemized: \$(1b)			b. Not-Itemized:	\$(6b)
a. Itemized (from Schedule A): \$ (2a)			7. Loans Made a. Itemized (from Schedule B):	(70)
b. Not-Itemized: \$ (2b)			b. Not-Itemized:	\$(7a) \$(7b)
3. Loans Received			8. Expenditures	3(70)
a. Itemized (from Schedule A): \$(3a)			a. Itemized (from Schedule B):	\$(8a)
b. Not-Itemized \$(3b)			b. Not-Itemized	\$(8b)
4. Other Receipts			9. Independent Expenditures	
a. Itemized (from Schedule A): \$ (4a) b. Not-Itemized \$ (4b)			a. Itemized (from Schedule B-9	, ,
		\$(4b)	b. Not-Itemized	\$(9b)
TOTAL RECE	PTS (1a thru 4b)	\$(TR)	TOTAL EXPENDITURES (6a thru	9b)\$(TE)
In-Kind Con	************** :ributions	*******	SECTION C — DEBTS A (Include previously repor	ND OBLIGATIONS
a. Itemized (from Schedule I): \$(5a)			10. a. Itemized (from Schedule C):	\$(10a)
b. Not-Itemi	zed	\$(5b)	b. Not-Itemized	\$(10b)
TOTAL IN-KIND (5a + 5b) \$(TI)			TOTAL DEBTS & OBLIGATIONS	\$
******	*******	*******	SECTION D — CAS	**************************************
Name and address of person submitting this report <u>if other</u> than the committee's Chair or Treasurer:			Cash available at beginning of reporting period	
			reporting period Total Receipts from Section A (TR	
		**	Total cash (A) plus (E	
			Total Expenditures from Section B (TE	(D)
		·	Funds available at close or reporting period (C minus D)	
			Investments total (if applicable	
		· · · · · · · · · · · · · · · · · · ·		
IFICATION: I DECL FEMENTS) HAS BEI ICLE 9 OF THE FLEY	NE THAT THIS QUAR' IN EXAMINED BY ME A TION CODE LUNDERS	EKLY REPORT OF CAMPAIGN CONTRIE ND TO THE BEST THE BEST OF MY KNO TAND THAT WILLFILLY FILING A FALSE	SUTIONS AND EXPENDITURES (INCLUDING ACCOM WLEDGE AND BELIEF IS A TRUE, CORRECT AND COI OR INCOMPLETE STATEMENT IS SUBJECT TO A CIV	IPANYING SCHEDULES AND MPLETE REPORT AS REQUIRED BY IL PENALTY OF AT LEAST \$1001 AND
TO \$5000.	7/-	THE THE THE TENTON ALDE	The state of the s	T. STREET OF THE BERN PLOOT RING
	Heren	uner.		1-12-21
ENIATURE OF C	MANAITTEE TOEAS	URER OR CANDIDATE		DATE